

IN THE MATTER OF
HARPAL S. MANGAT, M.D.

Respondent

License Number: D58756

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* BEFORE THE
* MARYLAND STATE
* BOARD OF PHYSICIANS

*
* Case Number: 2217-0017B

* * * * *

CONSENT ORDER

On April 21, 2017, Disciplinary Panel B ("Panel B") of the Maryland State Board of Physicians (the "Board") charged Harpal Mangat, M.D. (the "Respondent"), License Number D58756, under the Maryland Medical Practice Act (the "Act"), Md. Code Ann., Health Occ. ("Health Occ.") §§ 14-101 *et seq.* (2014 Repl. Vol. and 2015 Supp.).

The pertinent provision of the Act under Health Occ. § 14-404 provides the following:

- (a) Subject to the hearing provisions of § 14-405 of this subtitle, a disciplinary panel, on the affirmative vote of a majority of the quorum of the disciplinary panel, may reprimand any licensee, place any licensee on probation, or suspend or revoke a license if the licensee:

...

- (3) Is guilty of: (ii) Unprofessional conduct in the practice of medicine[.]

THE AMA CODE OF MEDICAL ETHICS

The American Medical Association ("AMA") Code of Medical Ethics provides in pertinent part:

OPINION 8.19 -- Self-Treatment or Treatment of Immediate Family Members

Physicians generally should not treat themselves or members of their immediate families. Professional objectivity may be compromised when an immediate family member or the physician is the patient; the physician's personal feelings may unduly influence his or her professional judgment, thereby interfering with the care being delivered. Physicians may fail to probe sensitive areas when taking the medical history or may fail to perform intimate parts of the physical examination. Similarly, patients may

feel uncomfortable disclosing sensitive information or undergoing an intimate examination when the physician is an immediate family member. This discomfort is particularly the case when the patient is a minor child, and sensitive or intimate care should especially be avoided for such patients. When treating themselves or immediate family members, physicians may be inclined to treat problems that are beyond their expertise or training. If tensions develop in a physician's professional relationship with a family member, perhaps as a result of a negative medical outcome, such difficulties may be carried over into the family member's personal relationship with the physician.

Concerns regarding patient autonomy and informed consent are also relevant when physicians attempt to treat members of their immediate family. Family members may be reluctant to state their preference for another physician or decline a recommendation for fear of offending the physician. In particular, minor children will generally not feel free to refuse care from their parents. Likewise, physicians may feel obligated to provide care to immediate family members even if they feel uncomfortable providing care.

It would not always be inappropriate to undertake self-treatment or treatment of immediate family members. In emergency settings or isolated settings where there is no other qualified physician available, physicians should not hesitate to treat themselves or family members until another physician becomes available. In addition, while physicians should not serve as a primary or regular care provider for immediate family members, there are situations in which routine care is acceptable for short-term, minor problems. Except in emergencies, it is not appropriate for physicians to write prescriptions for controlled substances for themselves or immediate family members.

On October 25, 2017, a conference with regard to this matter was held before a panel of the Board's Disciplinary Committee for Case Resolution ("DCCR"). As a result of the DCCR, the Respondent agreed to enter into this Consent Order, consisting of Findings of Fact, Conclusions of Law and Order.

FINDINGS OF FACT

BACKGROUND/LICENSING INFORMATION

1. The Respondent was initially licensed to practice medicine in Maryland on May 17, 2002, under License Number D58756. The Respondent's license is scheduled to expire on September 30, 2017.
2. The Respondent practices medicine in Frederick, Maryland.

BOARD INVESTIGATIVE FINDINGS

3. On or about July 26, 2016, the Board received a complaint from a managed health care provider alleging that since 2014, the Respondent treated himself and family members. The complaint further alleged that the Respondent had submitted to the health care provider claims for payment for services he had provided to himself and family members.

4. The Board thereafter initiated an investigation of this matter. In furtherance of its investigation, the Board requested the Respondent to respond to the allegations contained in the complaint.

5. On September 15, 2016, the Board issued to the Respondent a subpoena for a "complete copy of any and all medical AND billing records for the following: [listing the Respondent and three named family members]." (Emphasis in original).

6. By letter dated October 9, 2016, the Respondent stated that he did not treat himself and described the limited treatments he provided to his family members, one of whom is a physician. The Respondent provided the medical records he maintained for two of his three family members. 1

7. Information provided by the health care management provider revealed that the Respondent billed on one occasion for treatments he had provided to himself and on 21 separate occasions for treatments he provided to his family members.2

1One of the family members is a physician. That individual has been separately charged by the Board based on a complaint by the managed health care provider that the physician-family member was treating family members, including the Respondent.

2 The Respondent billed on several occasions using CPT codes designated for therapeutic exercise (CPT code 97110), therapeutic activity (CPT code 97530) and manual therapy (CPT code 97140). Review of the Respondent's records does not support billing under those codes.

8. In furtherance of its investigation, the Board subpoenaed from the Maryland Prescription Drug Monitoring Program ("PDMP") a print-out of "all controlled substances written by [the Respondent] from January 2014."

9. The PDMP print-out revealed that the Respondent prescribed controlled substances to one of his family members on four separate prescriptions. The Respondent did not prescribe controlled substances to himself.³

CONCLUSIONS OF LAW

Based on the foregoing findings of fact, Disciplinary Panel B concludes as a matter of law that the Respondent is guilty of unprofessional conduct in the practice of medicine, in violation of Md. Code Ann., Health Occ. II § 14-404(a)(3)(ii)

ORDER

It is, on the affirmative vote of a majority of the quorum of Board, hereby

ORDERED that the Respondent is **REPRIMANDED**; and it is further

ORDERED that the Respondent is placed on **PROBATION** for a minimum period of six months.⁴ During the probationary period, the Respondent shall comply with all of the following probationary terms and conditions:

- a. The Panel will issue administrative subpoenas to the Maryland Prescription Drug Monitoring Program on a quarterly basis for the Respondent's CDS prescriptions. The administrative subpoenas will request a review of the Respondent's CDS prescriptions from the beginning of each quarter;
- b. Within three months, the Respondent shall successfully complete a Board disciplinary panel-approved course in medical record keeping and billing. The Board disciplinary panel will not accept a course taken over the Internet. The course may not be used to fulfill the continuing medical education credits required for license renewal. The Respondent must

³ To maintain confidentiality, the medications prescribed by the Respondent are not identified in this document.

⁴ If the Respondent's license expires while the Respondent is on probation, the probationary period will be tolled.

provide documentation to the Board that the Respondent has successfully completed the course.

AND IT IS FURTHER ORDERED that if the Respondent allegedly fails to comply with any term or condition of probation or this Consent Order, the Respondent shall be given notice and an opportunity for a hearing. If there is a genuine dispute as to a material fact, the hearing shall be before an Administrative Law Judge of the Office of Administrative Hearings. If there is no genuine dispute as to a material fact, the Respondent shall be given a show cause hearing before the Board or Panel B; and it is further

ORDERED that, after the appropriate hearing, if the Board or Panel B determines that the Respondent has failed to comply with any term or condition of probation or this Consent Order, the Board or Panel B may reprimand the Respondent, place the Respondent on probation with appropriate terms and conditions, or suspend or revoke the Respondent's license to practice medicine in Maryland. The Board or Panel B may, in addition to one or more of the sanctions set forth above, impose a civil monetary fine upon the Respondent; and it is further

ORDERED that there is no early termination of probation; and it is further

ORDERED that the Respondent is responsible for all costs incurred in fulfilling the terms and conditions of this Consent Order; and it is further

ORDERED that, after **six months**, the Respondent may submit a written petition to the Board or Panel B requesting termination of probation. After consideration of the petition, the probation may be terminated through an order of the Board or Panel B. The Board or Panel B will grant the petition to terminate the probation if the Respondent has complied with all of the probationary terms and conditions and there are no pending complaints related to the charges; and it is further

ORDERED that the Respondent shall comply with the Maryland Medical Practice Act, Md. Code Ann., Health Occ. II §§ 14-101—14-702, and all laws and regulations governing the practice of medicine in Maryland; and it is further

ORDERED that, unless stated otherwise in the order, any time period prescribed in this order begins when the Consent Order goes into effect. The Consent Order goes into effect upon the signature of the Board's Executive Director, who signs on behalf of Panel B; and it is further.

ORDERED that this Consent Order is a public document pursuant to Md. Code Ann., Gen. Prov. §§ 4-101 *et seq.* (2014).

12/22/2017
Date

Christine A. Farrelly
Christine A. Farrelly
Executive Director
Maryland State Board of Physicians

CONSENT

I, Harpal S. Mangat, M.D., acknowledge that I was represented by counsel before entering this Consent Order. By this Consent and for the purpose of resolving the issues raised by the Board, I agree and accept to be bound by the foregoing Consent Order and its conditions.

I acknowledge the validity of this Consent Order as if entered into after the conclusion of a formal evidentiary hearing in which I would have had the right to counsel, to confront witnesses, to give testimony, to call witnesses on my own behalf, and to all other substantive and procedural protections provided by the law. I agree to forego my opportunity to challenge these allegations. I acknowledge the legal authority and jurisdiction of the Board to initiate these proceedings and to issue and enforce this Consent Order. I affirm that I am waiving my right to appeal any adverse ruling of a disciplinary panel of the Board that I might have filed after any such hearing.

I sign this Consent Order voluntarily and without reservation, and I fully understand and comprehend the language, meaning and terms of the Consent Order.

11/29/17.
Date

H S Mangat
Harpal S. Mangat, M.D.
Respondent

NOTARY

STATE OF MARYLAND

CITY/COUNTY OF Montgomery

I HEREBY CERTIFY that on this 29th day of Nov 2017, before me, a Notary Public of the foregoing State and City/County, personally appeared Harpal S. Mangat, M.D. and made oath in due form of law that signing the foregoing Consent Order was his voluntary act and deed.

AS WITNESSETH my hand and notarial seal.



Notary Public

My commission expires: _____

